

PROJECT 10073 RECORD CARD

1. DATE 1 June 1954	2. LOCATION Boston, Massachusetts.	12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon <input type="checkbox"/> Was Aircraft <input type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft <input type="checkbox"/> Was Astronomical <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical <input type="checkbox"/> Other <input type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown
3. DATE-TIME GROUP Local 0930 (DST) GMT 01/1330Z	4. TYPE OF OBSERVATION <input checked="" type="checkbox"/> Ground-Visual <input type="checkbox"/> Ground-Radar <input type="checkbox"/> Air-Visual <input type="checkbox"/> Air-Intercept Radar	
5. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6. SOURCE TWA PILOT [REDACTED]	
7. LENGTH OF OBSERVATION 5 - 8 Minutes	8. NUMBER OF OBJECTS One	9. COURSE ---
10. BRIEF SUMMARY OF SIGHTING Very high, appeared as milky balloon like object. 5 or more men on ground observing with BX.		11. COMMENTS Grenier AFB released balloon 0430 hrs. Pilot feels it was a balloon.

ATIC FORM 329 (REV 26 SEP 52)

34. What were the weather conditions at the time you saw the object?

34.1 CLOUDS (Circle One)

- a. Clear sky
- b. Hazy
- c. Scattered clouds CLOUDS
- d. Thick or heavy clouds
- e. Don't remember

34.2 WIND (Circle One)

- a. No wind
- b. Slight breeze
- c. Strong wind
- d. Don't remember

34.3 WEATHER (Circle One)

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

34.4 TEMPERATURE (Circle One)

- a. Cold
- b. Cool
- c. Warm
- d. Hot
- e. Don't remember

35. When did you report to some official that you had seen the object?

I CHECKED 10/20/78 ON THE LINE
Day Month Year

36. Was anyone else with you at the time you saw the object?

(Circle One) Yes No

36.1 IF you answered YES, did they see the object too?

(Circle One) Yes No

36.2 Please list their names and addresses:

HULL-TU A EMPLOYEES MENTIONED
BOSTON-LOGAN AIRPORT CONTROL TOWER
OPERATORS - IT WAS THEM TO CALL BOSTON &
LET ME & THE OTHER
ONE
WKS

37. Was this the first time that you had seen an object or objects like this?

(Circle One) Yes No

37.1 IF you answered NO, then when, where, and under what circumstances did you see other ones?

38. In your opinion what do you think the object was and what might have caused it?

**U. S. AIR FORCE TECHNICAL INFORMATION SHEET
(SUMMARY DATA)**

In order that your information may be filed and coded as accurately as possible, please use the following space to write out a short description of the event that you observed. You may repeat information that you have already given in the questionnaire, and add any further comments, statements, or sketches that you believe are important. Try to present the details of the observation in the order in which they occurred. Additional pages of the same size paper may be attached if they are needed.

NAME _____ <small>(Indicate rank)</small>	(Do Not Write in This Space)
SIGNATURE _____	CODE: _____
DATE <u>Aug 3 1954</u>	

This about all - I asked Boston how to forward my information they said - on wire New York received a wire message a abt 9 AIR FORCE - MASS. WIRE ROAD. AIRPLANE went up to 454 ft. & then object moved away from them?

Half hour later another wire message from TWA - Boston said it GRISNIER AIR FORCE BOST SAYS IT WAS A BALLOON they had released at 8x30 AM & in - this did not start how far it was & where I saw it unless it set early spisted at 50 to 100.00 ft. what day?

We saw it get it way the altitude going east and EAST mostly about a mile or two off on spiral to 010 He see it? - was it about him? - think it was a balloon??

01/0930 Boston MA 02
19

Muthi

AIR TECHNICAL INTELLIGENCE CENTER
WRIGHT-PATTERSON AIR FORCE BASE
OHIO

In reply refer to
AFOIN-ATIAE-5 10073

23 JUN 1981

AMT

Captain [REDACTED]

Port Washington, L. I., New York

Dear Captain [REDACTED]

The Air Technical Intelligence Center would like to thank you for the information you submitted, by telephone, concerning the sighting of an unidentified flying object.

In order that we may obtain a more complete record of the sighting, it is requested that you fill out and return the inclosed technical information sheet.

Many thanks again for your interest in this matter.

Sincerely,

R. E. Schum
CWO, USAF
Asst. Adj.

1 Incl
Questionnaire

8. IF you saw the object at NIGHT, TWILIGHT, or DAWN, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight — pitch dark
- d. Don't remember

9. Was the object brighter than the background of the sky?

(Circle One):

a. Yes

b. No

c. Don't remember

10. IF it was BRIGHTER THAN the sky background, was the brightness like that of an automobile headlight?

(Circle One) a. A mile or more away (a distant car)?

b. Several blocks away?

c. A block away?

d. Several yards away?

e. Other

11. Did the object:

(Circle One for each question)

- | | | | |
|---|--------------------------------------|----|------------|
| a. Appear to stand still at any time? | <input checked="" type="radio"/> Yes | No | Don't Know |
| b. Suddenly speed up and slow down at any time? | <input checked="" type="radio"/> Yes | No | Don't Know |
| c. Break up into parts or rejoin? | <input checked="" type="radio"/> Yes | No | Don't Know |
| d. Give off smoke? | <input checked="" type="radio"/> Yes | No | Don't Know |
| e. Change brightness? | <input checked="" type="radio"/> Yes | No | Don't Know |
| f. Change shape? | <input checked="" type="radio"/> Yes | No | Don't Know |
| g. Flicker, throb, or pulsate? | <input checked="" type="radio"/> Yes | No | Don't Know |

12. Did the object move behind something at anytime, particularly a cloud?

(Circle One): Yes No Don't Know.

IF you answered YES, then tell what

it moved behind: FIRST NOTICED IT BEHIND - CLOUDS

HAPPENED TO MOVE WITH US IN DIRECTION 280° TRUE

-1 REFLECTED ON WATER - HAD TO BE IN WATER - FROM

13. Did the object move in front of something at anytime, particularly a cloud?

CLOUDS WERE BLACK AND MIRRORED TO SIDE UP -

(Circle One): Yes No Don't Know.

IF you answered YES, then tell what

it moved in front of: -

14. Did the object appear: (Circle One):

a. Solid?

b. Transparent?

c. Don't Know,

15. Did you observe the object through any of the following?

- | | | | | | |
|-----------------|--------------------------------------|----|---------------|--------------------------------------|----|
| a. Eyeglasses | <input checked="" type="radio"/> Yes | No | e. Binoculars | <input checked="" type="radio"/> Yes | No |
| b. Sun glasses | <input checked="" type="radio"/> Yes | No | f. Telescope | <input checked="" type="radio"/> Yes | No |
| c. Windshield | <input checked="" type="radio"/> Yes | No | g. Theodolite | <input checked="" type="radio"/> Yes | No |
| d. Window glass | <input checked="" type="radio"/> Yes | No | h. Other | | |

U. S. AIR FORCE TECHNICAL INFORMATION SHEET

This questionnaire has been prepared so that you can give the U. S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes, and will be regarded as confidential material. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that, if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

15 JUL 1957

Day Month Year

2. Time of day:

04 30

Hour Minutes

(Circle One): A.M. P.M.

3. Time zone:

- (Circle One):
- a. Eastern
 - b. Central
 - c. Mountain
 - d. Pacific
 - e. Other _____

- (Circle One):
- a. Daylight Saving
 - b. Standard

4. Where were you when you saw the object?

on left side - cockpit in T-33 CONVERSION
airplane. 15 miles west of Lemo, Colorado about
VFW HOSPITAL building - 8 MILE CREEK - 41° 40' N
Additional remarks:
CLOUDS - 100% Partly cloudy - RIBBLE FLITE
EAST SIDE ROAD - RAINY DAWN - DUST - SPARKS

5. Estimate how long you saw the object.

Hours Minutes Seconds

5.1 Circle one of the following to indicate how certain you are of your answer to Question 5.

- a. Certain
 b. Fairly certain
 c. Not very sure
 d. Just a guess

6. What was the condition of the sky?

- (Circle One):
- a. Bright daylight
 - b. Dull daylight
 - c. Bright twilight

- d. Just a trace of daylight
- e. No trace of daylight
- f. Don't remember

7. IF you saw the object during DAYLIGHT, TWILIGHT, or DAWN, where was the SUN located as you looked at the object?

- (Circle One):
- a. In front of you
 - b. In back of you
 - c. To your right

- d. To your left
- e. Overhead
- f. Don't remember

20. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

PLANE CLOUDS HAVING FROM YARD OUT
OUR RECORD MADE ON 40A AND 200
Plane was at 20000' on 20 May 13 from Tamm
told us it will pull up 5° from

21. IF POSSIBLE, try to guess or estimate what the real size of the object was in its longest dimension.

2 feet. How HIGH was IT?

22. How large did the object or objects appear as compared with one of the following objects held in the hand and at about arm's length?

(Circle One):

- a. Head of a pin
- b. Pea
- c. Dime
- d. Nickel
- e. Quarter
- f. Half dollar
- g. Silver dollar
- h. Baseball
- i. Grapefruit
- j. Basketball
- k. Other _____

- 22.1 (Circle One of the following to indicate how certain you are of your answer to Question 22.

- a. Certain
- b. Fairly certain
- c. Not very sure
- d. Uncertain

23. How did the object or objects disappear from view? NO - I FLEW

AWAY FROM ME

24. In order that you can give as clear a picture as possible of what you saw, we would like for you to imagine that you could construct the object that you saw. Of what type material would you make it? How large would it be, and what shape would it have? Describe in your own words a common object or objects which when placed up in the sky would give the same appearance as the object which you saw.

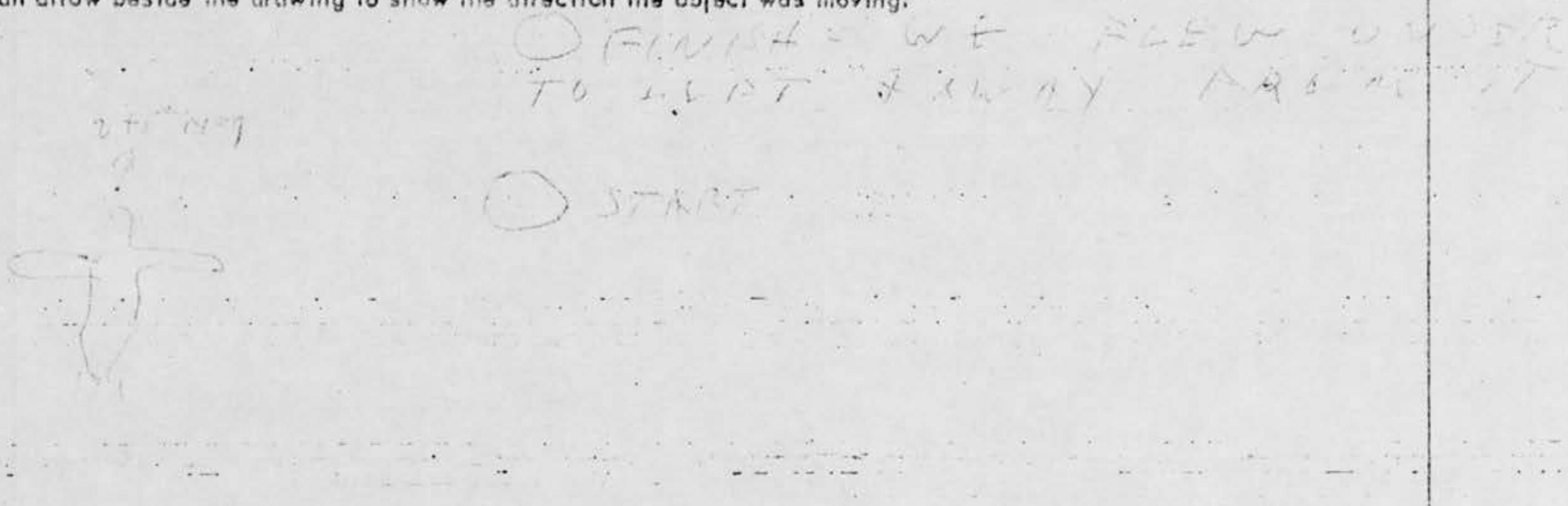
THE BALLOON MAN

16. Tell in a few words the following things about the object.

a. Sound No

b. Color "Hairy" white - like plastic

17. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.



18. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
 - b. Like a bright star
 - c. Sharply outlined
 - d. Don't remember

- e. Other _____

19. IF there was MORE THAN ONE object, then how many were there? _____

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

25. Where were you located when you saw the object? (Circle One):

- a. Inside a building
- b. In a car
- c. Outdoors
- d. In an airplane
- e. At sea
- f. Other _____

26. Were you (Circle One):

- a. In the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Flying near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other _____

27. What were you doing at the time you saw the object, and how did you happen to notice it?

FLYING TIE PLANE OVER NEW YORK MELBOURNE
TO NEW YORK

28. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

28.1 What direction were you moving? (Circle One)

- | | | | |
|--------------|--------------|--------------|--------------|
| a. North | c. East | e. South | g. West |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

28.2 How fast were you moving? about 70 miles per hour.

28.3 Did you stop at any time while you were looking at the object?

(Circle One) Yes No

29. What direction were you looking when you first saw the object? (Circle One)

- | | | | |
|--------------|--------------|--------------|--------------|
| a. North | c. East | e. South | g. West |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

30. What direction were you looking when you last saw the object? (Circle One)

- | | | | |
|--------------|--------------|--------------|--------------|
| a. North | c. East | e. South | g. West |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

31. If you are familiar with bearing terms (angular direction), try to estimate the number of degrees the object was from true North and also the number of degrees it was upward from the horizon (elevation).

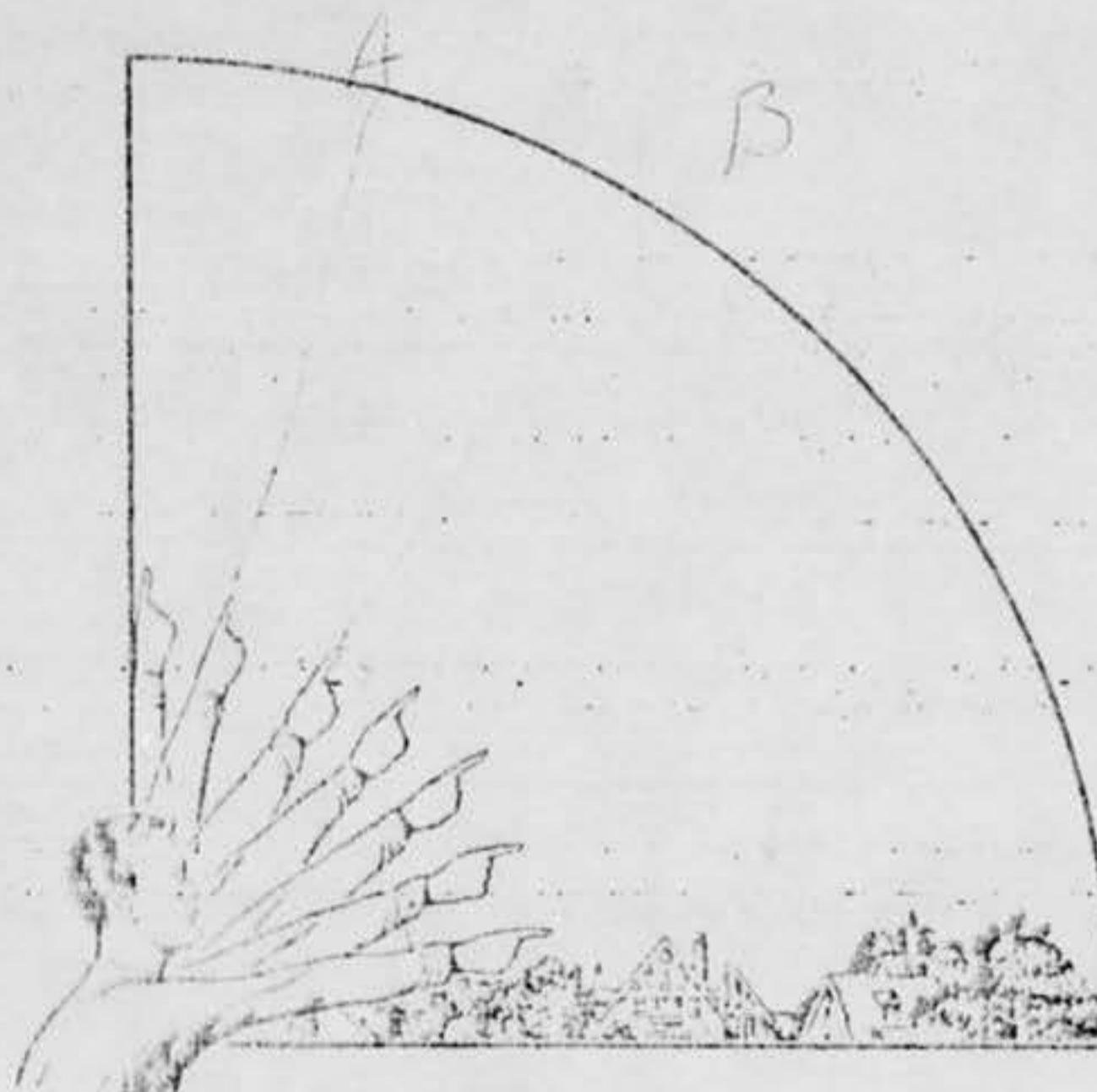
31.1 When it first appeared:

- a. From true North 270 degrees.
- b. From horizon 80 degrees.

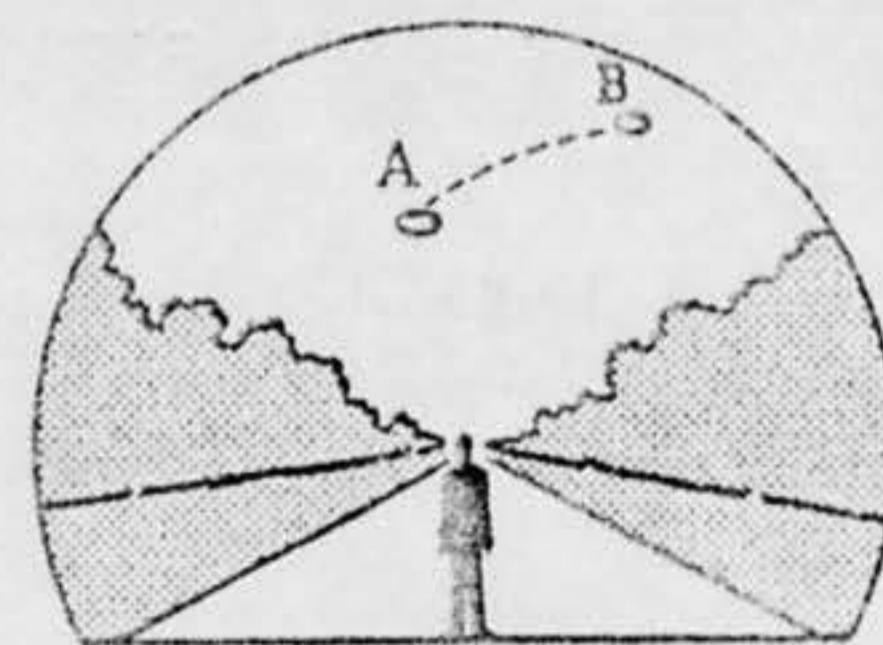
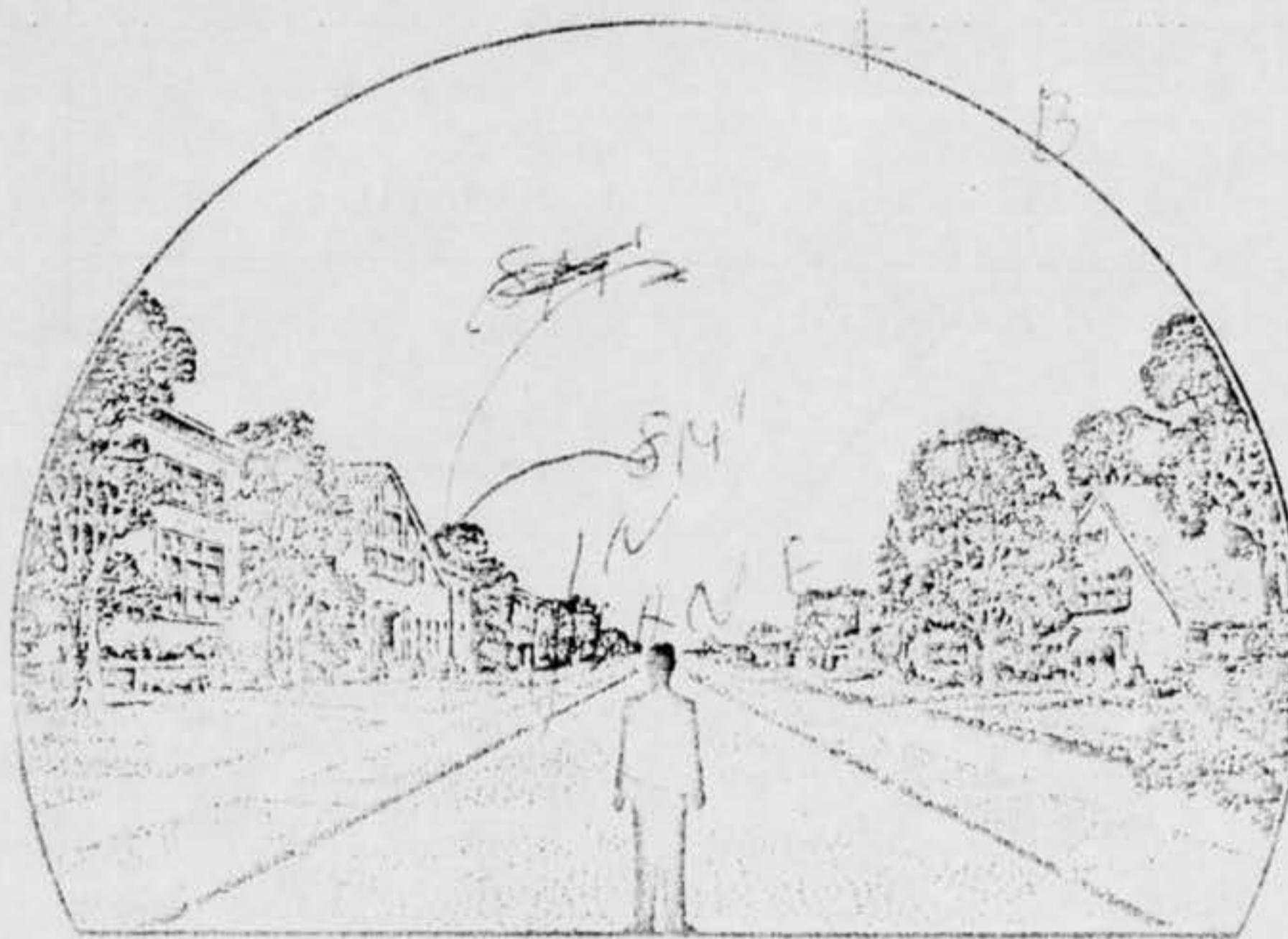
31.2 When it disappeared:

- a. From true North 270 degrees.
- b. From horizon 70 degrees.

32. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you last saw it.



33. In the following larger sketch place an "A" at the position the object was when you *first* saw it, and a "B" at its position when you *last* saw it. Refer to smaller sketch as an example of how to complete the larger sketch.



39. Do you think you can estimate the speed of the object?

(Circle One) Yes No

IF you answered YES, then what speed would you estimate? _____ m.p.h.

40. Do you think you can estimate how far away from you the object was?

(Circle One) Yes No

IF you answered YES, then how far away would you say it was? _____ feet.

41. Please give the following information about yourself:

NAME _____

Last Name _____

First Name _____

Middle Name _____

ADDRESS _____

Street _____

City _____

Zone _____

State _____

TELEPHONE NUMBER _____

What is your present job? _____

Age 47 Sex Male

Office Manager

Please indicate any special educational training that you have had.

a. Grade school ✓

e. a. Technical school FLYING SCHOOL

b. High school ✓

(Type) _____

c. College _____

f. Other special training _____

d. Post graduate _____

42. Date you completed this questionnaire:

Aug 3 1954
Day Month Year